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REQUEST FOR WITHDRAWAL **AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS**

'						
Application Number	10/762,797					
Filing Date	01/22/2004					
First Named Inventor	Ben Cizowski					
Art Unit	1743					
Examiner Name						
Attorney Docket Number	00024-001					

P.O. E	nissioner fo Box 1450 ndria, VA 22										·
Please withdraw me as attorney or agent for the above identified patent application, and											
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The reasons for this request are: I have accepted a position as in-house counsel at Circle Group Holdings, Inc. Further representation in this matter would be inappropriate.											
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Name	Timothy J. Fulli	/////				Registration No. 50685					
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NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.											

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.